

## **OPT and STEM OPT Update Form**

Complete and email this form to Carol Holz (<u>carol.holz@alaska.edu</u>) and Reija Shnoro (<u>rsshnoro@alaska.edu</u>) within 10 days of any change.

Government regulations require notifying UAF OIPI within 10 days of any change in contact information as well as the addition or change in employment.

Date:	Last Name and First Name:
UA ID:	<u></u>
Current residence	ee address
City, State, Posta	l Code:
Email:	Phone number:
Mailing address	(if different)
Street Address: _	I Codo.
City, State, Posta	l Code:
Employer Inform	nation
• •	ess Name:
Street Address:	
- Address line 2 (o	ptional):
City, State, Posta	l Code:
If on STEM OPT,	is your employer e-verified: YES NO
Employment info	
Position title:	
Hours per week:	
Employment star	rt date:
	oyers, last day with your previous employer:
How does this jo	b relate to your field of study? What you provide here will be added to your SEVIS
record. Max 1,00	00 characters: